

ASSIGNMENT OR TERMINATION OF BUILDING		DATE
TO:		FROM:
I hereby request <input type="checkbox"/> Assignment <input type="checkbox"/> Termination of buildings indicated below.		
BUILDING NUMBER	TYPE OF BUILDING	
ASSIGNMENT DATE	TERMINATION DATE	
TYPED NAME, GRADE, BRANCH ORG OF REQUESTER	SIGNATURE OF REQUESTER	
TYPED NAME, GRADE, BRANCH ORG OF APPROVING AUTHORITY	SIGNATURE OF APPROVING AUTHORITY	
RECEIPT		
I acknowledge receipt of buildings indicated above and keys therefor. I assume full responsibility for adequately maintaining said buildings against all damage other than fair wear and tear.		
NUMBER OF KEYS	DATE	SIGNATURE OF REQUESTER